

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. <i>08/176,572</i>	FILING DATE				
						CLAIMS					
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
IND.	DEP.	IND.	DEP.	IND.	DEP.						
1						51					
2						52					
3						53					
4						54					
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44						94					
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46						96					
47						97					
48						98					
49						99					
50						100					
TOTAL IND.	<i>3</i>					TOTAL IND.					
TOTAL DEP.	<i>2</i>					TOTAL DEP.					
TOTAL C. CLAIMS	<i>5</i>					TOTAL CLAIMS					

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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